

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:

Harry HANNA et al.

Title:

SAFETY BELT APPARATUS FOR VEHICLES

Prior Appl. No.:

09/736,252

Prior Appl. Filing Date:

December 15, 2000

Examiner:

Unassigned

Art Unit:

Unassigned

DIVISIONAL PATENT APPLICATION TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

[] Continuation [X] Division [] Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the aboveidentified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

Enclosed are:

- [X] Application Data Sheet (37 CFR 1.76) (3, pages).
- [X] Preliminary Amendment (8 pages).
- Specification, Claim(s), and Abstract (31 pages). [X]
- [X] Formal drawings (8 sheets, Figures 1, 2, 3, 4, 5, 6, 7, 8 and 9).
- [X] Copy of Declaration and Power of Attorney (2 pages).
- [X] Information Disclosure Statement (2 pages).
- [X] Form PTO/SB/08 listing 15 references (1 page).



The filing fee is calculated below:

	Claims		Included in		Extra				Fee
	as Filed		Basic Fee		Claims		Rate		Totals
Basic Fee							\$770.00		\$770.00
Total Claims:	7	-	20	=	0	x	\$18.00	=	\$0.00
Independen ts:	1	-	3	=	0	×	\$84.00	=	\$0.00
If any Multiple Dependent Claim(s) present: + \$280.00								=	\$0.00
							SUBTOTAL:	=	\$770.00
[]	Small	Enti	ty Fees A	pply	/ (subtrac	ct ½	of above):	=	\$0.00
TOTAL FILING FEE:								=	\$770.00

- [X] A check in the amount of \$770.00 to cover the filing fee is enclosed.
- [] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date October 7, 2003

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